

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
A001A	A	Batch Reject	The submission overlaps an existing accepted submission.
A002B	A	Batch Reject	A C/R record cannot be followed by a C/R record
A004A	A	Batch Reject	A record of the same record type and adjustment type cannot reference the same parent record within the same submission.
A005A	A	Batch Reject	A record of the same record type and adjustment type cannot reference the same parent record from a previous submission.
D003D	R	Batch Reject	When the Data Source is a valid Data Source (exists in the master lookup table), it must be valid for this organization.
D003E	R	Batch Reject	The Data Source must be found in the master lookup table.
D004B	R	Batch Reject	Duplicate Record ID.
D005A	A	Batch Reject	When the Record Type equals O, the Parent Record ID must be null.
D005B	A	Batch Reject	When the Record Type equals N or C, the Parent Record ID must be provided.
D005C	A	Batch Reject	When the Record Type equals N or C, the data in the Parent Record ID must exist as a Record ID for that MCO.
D005F	A	Batch Reject	The Parent Record ID cannot equal the Record ID.
D006C	A	Batch Reject	When the Record Type equals N or C, the Original ID must point to an existing original transaction for that MCO.
D006D	A	Batch Reject	When Record Type equals "O" the original ID must equal the Record ID.
D006E	A	Batch accept	When Record Type = O or C with an adjustment type of N, Original ID must be provided.
D007D	R	Warning	The Paid Amount for a denied transaction must be zero.
D007E	R	Batch Accept	The Claim Status must equal P for a member share transaction.
D008B	A	Batch Reject	The numeric data on the reversal adjustment record (CR) must be the inverse of its parent.
D008C	A	Batch Reject	The non-numeric data on the reversal adjustment record (CR) must be the same as its parent.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 1 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D008F	R	Batch Reject	The reversal adjustment record must exist before a new adjustment record is created.
D009A	A	Batch Reject	When the Record Type equals C, the Adjustment Type must equal R or N.
D009B	A	Batch Reject	When the Record Type equals O or N, the Adjustment Type must be null.
D010D	A	Batch Reject	When the Record Type equals O, the Adjustment Type Detail must be null.
D011C	S	Batch Accept	When a Claim Adjustment Reason Code is provided, the code must exist in the master lookup table.
D011D	S	Batch Accept	When the Claim Adjustment Reason Code is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D011E	S	Warning	The Claim Adjustment Reason Code must be provided on a denied claim.
D011G	S	Batch Accept	When multiple Claim Adjustment Reason Codes are provided, the data must start with Claim Adjustment Reason Code field and the additional Claim Adjustment Reason Codes must sequentially fill the additional fields without gaps.
D011H	S	Batch Accept	When Claim Type is Non-pharmacy (i.e., Dental, Institutional, Outpatient or Professional) and Paid Amount is less than Charges, Claim Adjustment Reason Code must be provided.
D012C	S	Batch Accept	When a Claim Adjustment Reason Code 2 is provided, the code must exist in the master lookup table.
D012D	S	Batch Accept	When the Claim Adjustment Reason Code 2 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D013C	S	Batch Accept	When a Claim Adjustment Reason Code 3 is provided, it must exist in the master lookup table.
D013D	S	Batch Accept	When the Claim Adjustment Reason Code 3 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D014C	S	Batch Accept	When a Claim Adjustment Reason Code 4 is provided, it must exist in the master lookup table.
D014D	S	Batch Accept	When the Claim Adjustment Reason Code 4 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D015C	S	Batch Accept	When a Claim Adjustment Reason Code 5 is provided, it must exist in the master lookup table.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 2 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D015D	S	Batch Accept	When the Claim Adjustment Reason Code 5 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D016C	S	Batch Accept	When a Claim Adjustment Reason Code 6 is provided, it must exist in the master lookup table.
D016D	S	Batch Accept	When the Claim Adjustment Reason Code 6 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D018B	P	Batch Accept	An MA Billing Provider ID or a Billing Provider ID must be provided.
D018C	P	Batch Accept	The MA Billing Provider ID must equal the Submitter Organization ID for a member share transaction.
D018E	P	Batch Accept	When an MA Billing Provider ID is provided, it must exist in the master lookup table.
D018F	P	Warning	When MA Billing Provider ID is provided, it must be within date range.
D019B	P	Batch Reject	When a Billing Provider ID is provided, the Billing Provider ID-Qualifier must be provided.
D019E	P	Batch Reject	When a Billing Provider ID-Qualifier is provided, it must be one of the following uppercase values: 24, 34, XX or CO.
D020D	P	Batch Reject	When Billing Provider ID-Qualifier is provided, the Billing Provider ID must be provided.
D021A	P	Batch Accept	Billing Provider Last Name or Organization must be provided.
D024C	P	Batch Accept	The MA Rendering Provider ID must equal the Submitter Organization ID for a member share transaction.
D024D	P	Batch Accept	When the MA Rendering Provider ID is provided, it must exist in the master lookup table.
D024E	P	Warning	When MA Rendering Provider ID is provided, it must be within date range.
D025D	P	Batch Reject	When the Rendering Provider ID-Qualifier is provided, it must equal 24, 34, XX, or CO.
D025E	P	Batch Reject	When the Rendering Provider ID-Qualifier is provided, the Rendering Provider ID must be provided.
D026C	P	Batch Reject	When the Rendering Provider ID is provided, the Rendering Provider ID-Qualifier must also be provided.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 3 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D026E	S	Batch Accept	When the Rendering Provider ID is provided, the Rendering Provider Last Name must also be provided.
D027C	S	Batch Accept	When the Rendering Provider Last Name is provided, the Rendering Provider ID must also be provided.
D030A	M	Batch Accept	The Recipient ID must be provided.
D030D	M	Warning	The Recipient ID must exist in the master lookup table.
D030H	M	Warning	When a valid Recipient is provided, it must have Pace Partnership eligibility.
D031A	M	Batch Accept	The Recipient Last Name must be provided.
D032A	M	Batch Accept	The Recipient First Name must be provided.
D035C	S	Batch Accept	When the Diagnosis Code Additional 2 is provided, it must exist in the master lookup table.
D035D	S	Batch Accept	When the Diagnosis Code Additional 2 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D035E	S	Batch Accept	The Diagnosis Code Additional 2 must be null for a member share transaction.
D036C	S	Batch Accept	When the Diagnosis Code Additional 3 is provided, it must exist in the master lookup table.
D036D	S	Batch Accept	When the Diagnosis Code Additional 3 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D036E	S	Batch Accept	The Diagnosis Code Additional 3 must be null for a member share transaction.
D037C	S	Batch Accept	When the Diagnosis Code Additional 4 is provided, it must exist in the master lookup table.
D037D	S	Batch Accept	When the Diagnosis Code Additional 4 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D037E	S	Batch Accept	The Diagnosis Code Additional 4 must be null for a member share transaction.
D038C	S	Batch Accept	When the Diagnosis Code Additional 5 is provided, it must exist in the master lookup table.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 4 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D038D	S	Batch Accept	When the Diagnosis Code Additional 5 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D038E	S	Batch Accept	The Diagnosis Code Additional 5 must be null for a member share transaction.
D039C	S	Batch Accept	When the Diagnosis Code Additional 6 is provided, it must exist in the master lookup table.
D039D	S	Batch Accept	When the Diagnosis Code Additional 6 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D039E	S	Batch Accept	The Diagnosis Code Additional 6 must be null for a member share transaction.
D040C	S	Batch Accept	When the Diagnosis Code Additional 7 is provided, it must exist in the master lookup table.
D040D	S	Batch Accept	When the Diagnosis Code Additional 7 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D040E	S	Batch Accept	The Diagnosis Code Additional 7 must be null for a member share transaction.
D041C	S	Batch Accept	When the Diagnosis Code Additional 8 is provided, it must exist in the master lookup table.
D041D	S	Batch Accept	When the Diagnosis Code Additional 8 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D041E	S	Batch Accept	The Diagnosis Code Additional 8 must be null for a member share transaction.
D042A	S	Batch Accept	The Service Date From must be provided.
D043A	D	Batch Accept	The Service Date To must be provided.
D043C	S	Batch Accept	The Service Date To must be greater than or equal to the Service Date From.
D043D	S	Batch Accept	If Claim Type = Pharmacy, Service Date To must be less than or equal to posting date.
D044C	S	Batch Accept	When the Place of Service is provided, it must exist in the master lookup table.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 5 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D044D	S	Batch Accept	When the Place of Service is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D044E	S	Batch Accept	The Place of Service must be null for a member share transaction.
D044G	S	Batch Accept	If Claim Type = professional, Place of Service must be provided.
D046C	S	Batch Accept	When the Procedure Code is provided, it must exist in the master lookup table.
D046D	S	Batch Accept	When the Procedure Code is provided and the code is in the master lookup table, then it must be within date range using run_out_period end date (based on service dates).
D046F	S	Warning	Service dates are greater than the Procedure Code end date and less than or equal to the Procedure Code grace period end date.
D046H	S	Batch Accept	The service dates are greater than the Procedure Code end date and is less than or equal to the Procedure Code grace period end date.
D046I	S	Batch Accept	Procedure Code ICD, Procedure Code or Revenue Code must be provided.
D047C	S	Batch Accept	When Procedure Code Modifier 1 is provided, it must exist in the master lookup table.
D047D	S	Batch Accept	When the Procedure Code Modifier 1 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D047E	S	Batch Accept	When any number of modifiers are provided, the data must start with the Procedure Code Modifier 1, and each subsequent modifier code field must be filled consecutively without gaps.
D048C	S	Batch Accept	When Procedure Code Modifier 2 is provided, it must exist in the master lookup table.
D048D	S	Batch Accept	When the Procedure Code Modifier 2 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D049C	S	Batch Accept	When the Procedure Code Modifier 3 is provided, it must exist in the master lookup table.
D049D	S	Batch Accept	When the Procedure Code Modifier 3 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 6 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D050C	S	Batch Accept	When the Procedure Code Modifier 4 is provided, it must exist in the master lookup table.
D050D	S	Batch Accept	When the Procedure Code Modifier 4 is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D051C	S	Batch Accept	When the Revenue Code is provided, it must exist in the master lookup table.
D051D	S	Batch Accept	When the Revenue Code is provided and the code is in the master lookup table, it must also be within the date range (based on service dates).
D052A	S	Batch Accept	Quantity must be provided.
D052F	S	Batch Reject	The Quantity must reflect the same sign as the dollar fields.
D052I	S	Batch Accept	The Quantity must be null for a member share transaction.
D052J	S	Batch Accept	The Quantity must be greater than or equal to zero for an encounter transaction.
D056A	S	Batch Accept	Charges must be provided for an encounter transaction.
D056B	S	Batch Reject	Charges must be null for a member share transaction.
D056E	S	Batch Reject	The signs (+/-) for Charges, Allowed Amount, COB Paid Amount, and Paid Amount must be the same.
D056F	S	Batch Accept	Charges must be greater than or equal to zero for an encounter transaction.
D057B	S	Batch Accept	The Receipt Date must be less than or equal to the Posting Date.
D057C	S	Batch Accept	The Receipt Date must be provided.
D058A	S	Batch Accept	The Paid Amount must be provided.
D058D	S	Batch Accept	The Paid Amount must be a negative amount for a member share transaction.
D058E	S	Warning	When the Claim Status equals P and the COB Paid Amount equals zero or null, the Paid Amount must be greater than zero.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 7 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D058F	S	Warning	The Paid Amount must be less than or equal to the Charges, when both are provided.
D058G	S	Batch Accept	The Paid Amount must be greater than or equal to zero for an encounter transaction.
D059B	R	Batch Reject	The Posting Date must be greater than or equal to the Begin Posting Date specified in the header.
D059C	R	Batch Reject	The Posting Date must be less than or equal to the End Posting Date specified in the header.
D061C	S	Batch Reject	The Allowed Amount must be null for a member share transaction.
D061D	S	Warning	The Allowed Amount must be provided for an encounter transaction.
D061E	S	Batch Accept	When supplied the Allowed Amount must be greater than or equal to zero for an encounter transaction.
D062E	S	Batch Accept	The Support Indicator must equal S or C for an encounter transaction.
D062F	S	Batch Accept	The Support Indicator must equal N for a member share transaction.
D063C	A	Batch Reject	When the Support Indicator equals N, the Member Share must equal C, R, S, or V.
D071B	M	Warning	When the Recipient Birth Date is provided, it must be less than or equal to the Service Date From.
D071C	M	Batch Accept	When the Recipient Birth Date is provided, the Recipient Birth Date plus 150 years must be greater than or equal to the Service Date From.
D071D	M	Warning	When the Recipient Birth date is provided and the recipient is found in the recipient master file with a date of birth, the Recipient Birth Date must equal the date of birth in the recipient master file.
D071E	M	Batch Accept	When both the Recipient Birth Date and the Recipient Death Date are provided, the Recipient Death Date must be greater than or equal to the Recipient Birth Date.
D072B	M	Warning	When the Recipient Death Date is provided, it must be less than or equal to the Posting Date.
D072C	M	Warning	When the Recipient Death date is provided and the TDOS is provided, then the Death date + 1 month must be >= TDOS.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 8 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D072D	M	Warning	When the Recipient Death Date is provided and the recipient is found in the recipient master file with a date of death, the Recipient Death Date must equal the date of death in the recipient master file.
D072E	S	Warning	When the MMIS recipient Master table has a death date, the death date must be provided.
D073A	S	Warning	When the DRG is provided, it must exist in the lookup table.
D073E	S	Warning	When the DRG is provided and the code is in the master lookup table, it must be within the date range (based on service dates).
D073F	S	Warning	The DRG must be null for a member share transaction.
D075C	S	Batch Accept	When the Diagnosis Code Principal is provided, it must exist in the master lookup table.
D075D	S	Batch Accept	When the Diagnosis Code Principal is provided and the code is in the master lookup table, it must be within the date range (based on service dates).
D075E	S	Batch Accept	The Diagnosis Code Principal must be null for a member share transaction.
D075F	S	Batch Accept	When any number of diagnoses codes are provided, the data must start with the Diagnosis Code Principal, and each subsequent diagnosis code field must be filled consecutively without gaps.
D076C	R	Batch Reject	When the Service Delivery Type exists in the master lookup table, it must be valid for this organization.
D076D	R	Batch Reject	The Service Delivery Type must exist in the master lookup table.
D076E	R	Warning	The Service Delivery Type must be provided.
D077C	S	Batch Accept	If Diagnosis Code Additional 9 is provided, it must exist on the Master Lookup table
D077D	S	Batch Accept	When the Diagnosis Code Additional 9 is provided and the code is in the master lookup table, then it must be within date range (based on service dates).
D077E	S	Batch Accept	The Diagnosis Code Additional 9 must be null for a member share transaction.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 9 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D078C	M	Batch Accept	When Patient Status Code is provided, it must exist in the Master Lookup Table.
D078D	M	Batch Accept	When Patient Status Code is provided, it must be within date range.
D078E	S	Batch Accept	If Claim Type = Institutional, Patient Status Code must be provided.
D078F	S	Batch Accept	Patient Status Code must be null for member share.
D079C	S	Batch Accept	When Procedure Code ICD Principal is provided, it must exist in the Master Lookup Table.
D079D	S	Batch Accept	When Procedure Code ICD Principal is provided, it must be within date range of the Procedure Date ICD Principal.
D079E	S	Batch Accept	If any Procedure Code ICD is provided, a Revenue Code must be provided.
D079F	S	Batch Accept	When Procedure Code ICD Principal is provided, the corresponding Procedure Date ICD must be provided.
D079G	S	Batch Accept	Procedure Codes ICD must be filled sequentially and without gaps.
D080C	S	Batch Accept	When Procedure Code ICD Additional 2 is provided, it must exist in the Master Lookup Table.
D080D	S	Batch Accept	When Procedure Code ICD Additional 2 is provided, it must be within date range of the Procedure Date ICD Additional 2.
D080E	S	Batch Accept	When Procedure Code ICD Additional 2 is provided, the corresponding Procedure Date ICD must be provided.
D081C	S	Batch Accept	When Procedure Code ICD Additional 3 is provided, it must exist in the Master Lookup Table.
D081D	S	Batch Accept	When Procedure Code ICD Additional 3 is provided, it must be within date range of the Procedure Date ICD Additional 3.
D081E	S	Batch Accept	When Procedure Code ICD Additional 3 is provided, the corresponding Procedure Date ICD must be provided.
D082C	S	Batch Accept	When Procedure Code ICD Additional 4 is provided, it must exist in the Master Lookup Table.
D082D	S	Batch Accept	When Procedure Code ICD Additional 4 is provided, it must be within date range of the Procedure Date ICD Additional 4.
D082E	S	Batch Accept	When Procedure Code ICD Additional 4 is provided, the corresponding Procedure Date ICD must be provided.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 10 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D083C	S	Batch Accept	When Procedure Code ICD Additional 5 is provided, it must exist in the Master Lookup Table.
D083D	S	Batch Accept	When Procedure Code ICD Additional 5 is provided, it must be within date range of the Procedure Date ICD Additional 5.
D083E	S	Batch Accept	When Procedure Code ICD Additional 5 is provided, the corresponding Procedure Date ICD must be provided.
D084C	S	Batch Accept	When Procedure Code ICD Additional 6 is provided, it must exist in the Master Lookup Table.
D084D	S	Batch Accept	When Procedure Code ICD Additional 6 is provided, it must be within date range of the Procedure Date ICD Additional 6.
D084E	S	Batch Accept	When Procedure Code is provided, the corresponding Procedure Date ICD must be provided.
D085B	S	Batch Accept	When Procedure Date ICD Principal is provided, corresponding Procedure Code ICD must be provided.
D085C	S	Batch Accept	Procedure Date ICD must be filled sequentially and without gaps.
D086B	S	Batch Accept	When Procedure Date ICD Additional 2 is provided, corresponding Procedure Code ICD must be provided.
D087B	S	Batch Accept	When Procedure Date ICD Additional 3 is provided, corresponding Procedure Code ICD must be provided.
D088B	S	Batch Accept	When Procedure Date ICD Additional 4 is provided, corresponding Procedure Code ICD must be provided.
D089B	S	Batch Accept	When Procedure Date ICD Additional 5 is provided, corresponding Procedure Code ICD must be provided.
D090B	S	Batch Accept	When Procedure Date ICD Additional 6 is provided, corresponding Procedure Code ICD must be provided.
D091C	S	Batch Accept	When Type of Bill Code is provided, it must exist in the Master Lookup Table.
D091E	S	Batch Accept	If Claim Type = Institutional, Type of Bill Code must be provided.
D091F	S	Batch Accept	Type of Bill Code must be null for member share.
D092B	S	Batch Accept	If Claim Type = Institutional, Statement From Date must be provided.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 11 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D092C	S	Batch Accept	Statement From Date must be null for member share.
D093B	S	Batch Accept	If Claim Type = Institutional, Statement To Date must be provided.
D093C	S	Batch Accept	Statement To Date must be null for member share.
D093D	S	Batch Accept	If Statement To Date and Statement From Date is present, Statement To Date must be greater than or equal to Statement From Date.
D094C	S	Batch Accept	When Admitting Diagnosis Code is provided, it must exist in the Master Lookup Table.
D094D	S	Batch Accept	When Admitting Diagnosis Code is provided, it must be within date range.
D094E	S	Batch Accept	Admitting Diagnosis Code must be null for member share.
D095C	S	Batch Accept	When External Cause of Injury Code is provided, it must exist in the Master Lookup Table.
D095D	S	Batch Accept	When External Cause of Injury Code is provided, it must be within date range.
D096B	S	Batch Accept	If Claim Type = Institutional, Admit Start Care Date must be provided.
D096C	S	Batch Accept	Admit Start Care Date must be null for member share.
D096D	S	Batch Accept	When Admit Start Care Date is present, is must be less than or equal to the Service Date From
D097C	S	Batch Accept	When Claim Type is provided, it must exist in the Master Lookup Table.
D097E	S	Batch Reject	Claim Type must be provided.
D097F	S	Batch Accept	Claim Type must be null for member share.
D098C	S	Warning	When Prescriber DEA number is provided, it must exist in the Master Lookup Table.
D098E	S	Batch Accept	If Claim Type = Pharmacy, Prescriber DEA Number must be provided.
D098F	S	Batch Accept	Prescriber DEA Number must be null for member share.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 12 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D098H	S	Batch Accept	When Prescriber DEA number is provided, the number must follow a pattern calculated by its mathematical formula.
D099E	S	Batch Accept	If Claim Type = Pharmacy, Prescription Number must be provided.
D099F	S	Batch Accept	Prescription Number must be null for member share.
D100C	S	Batch Accept	When Unit Dose Indicator is provided, it must be 0,1,2,3.
D100E	S	Warning	If Claim Type = Pharmacy, Unit Dose Indicator must be provided.
D100F	S	Batch Accept	Unit Dose Indicator must be null for member share.
D101C	S	Batch Accept	When Dispense as Written Indicator is provided, it must be 0, 1, or 8.
D101E	S	Warning	If Claim Type = Pharmacy, Dispense As Written must be provided.
D101F	S	Warning	Dispense As Written must be null for member share.
D102D	R	Batch Reject	Submitter Organization ID must exist in the master lookup table.
D102E	R	Batch Reject	Submitter Organization ID on the detail record must match the Submitter Organization ID on the header record.
D103B	S	Batch Accept	The Medicare Paid Amount must be zero for a member share transaction.
D103C	S	Batch Accept	The Medicare Paid Amount must be greater than or equal to zero for an encounter transaction.
D104C	S	Batch Accept	The Medicare COB Type must be null for a membershare transaction.
D104D	S	Batch Accept	When the Medicare Paid Amount is greater than zero (0), the Medicare COB Type must also be provided.
D105B	S	Batch Accept	The Other Payer Paid Amount (Primary) must be zero for a membershare transaction
D105C	S	Batch Accept	The Other Payer Paid Amount (Primary) must be greater than or equal to zero for an encounter transaction.
D106C	S	Batch Accept	The Other Payer COB Type (Primary) must be null for a membershare transaction.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 13 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D106D	S	Batch Accept	When the Other Payer Paid Amount (Primary) is greater than zero (0), the Other Payer COB Type (Primary) must also be provided.
D107B	S	Batch Accept	The Other Payer Paid Amount (Secondary) must be zero for a membershare transaction.
D107C	S	Batch Accept	The Other Payer Paid Amount (Secondary) must be greater than or equal to zero for an encounter transaction.
D108C	S	Batch Accept	The Other Payer COB Type (Secondary) must be null for a membershare transaction.
D108D	S	Batch Accept	When the Other Payer Paid Amount (Secondary) is greater than zero (0), the Other Payer COB Type (Secondary) must also be provided.
D109C	S	Warning	The Sum of the 3 COBs plus Paid Amount must be greater than or equal to Charges.
D110B	R	Batch Reject	When provided, Diagnosis POA indicators must be one of the following values; Y, N, U, W, or 1.
D110C	R	Batch Reject	When provided, the POA_Indicator field must contain POA indicator for every diagnosis code that is reported.
D111C	S	Batch Accept	If Diagnosis Code Additional 10 is provided, it must exist on the Master Lookup table.
D111D	S	Batch Accept	When the Diagnosis Code Additional 10 is provided and the code is in the master lookup table, then it must be within date range (based on dates of service).
D111E	S	Batch Accept	The Diagnosis Code Additional 10 must be null for member share.
D112C	S	Batch Accept	If Diagnosis Code Additional 11 is provided, it must exist on the Master Lookup table.
D112D	S	Batch Accept	When the Diagnosis Code Additional 11 is provided and the code is in the master lookup table, then it must be within date range (based on dates of service).
D112E	S	Batch Accept	The Diagnosis Code Additional 11 must be null for member share.
D113C	S	Batch Accept	If Diagnosis Code Additional 12 is provided, it must exist on the Master Lookup table.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 14 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D113D	S	Batch Accept	When the Diagnosis Code Additional 12 is provided and the code is in the master lookup table, then it must be within date range (based on dates of service).
D113E	S	Batch Accept	The Diagnosis Code Additional 12 must be null for member share.
D114C	S	Batch Accept	If Diagnosis Code Additional 13 is provided, it must exist on the Master Lookup table.
D114D	S	Batch Accept	When the Diagnosis Code Additional 13 is provided and the code is in the master lookup table, then it must be within date range (based on dates of service).
D114E	S	Batch Accept	The Diagnosis Code Additional 13 must be null for member share.
D115C	S	Batch Accept	If Diagnosis Code Additional 14 is provided, it must exist on the Master Lookup table.
D115D	S	Batch Accept	When the Diagnosis Code Additional 14 is provided and the code is in the master lookup table, then it must be within date range (based on dates of service).
D115E	S	Batch Accept	The Diagnosis Code Additional 14 must be null for member share.
D116C	S	Batch Accept	If Diagnosis Code Additional 15 is provided, it must exist on the Master Lookup table.
D116D	S	Batch Accept	When the Diagnosis Code Additional 15 is provided and the code is in the master lookup table, then it must be within date range (based on dates of service).
D116E	S	Batch Accept	The Diagnosis Code Additional 15 must be null for member share.
D117C	S	Batch Accept	If Diagnosis Code Additional 16 is provided, it must exist on the Master Lookup table.
D117D	S	Batch Accept	When the Diagnosis Code Additional 16 is provided and the code is in the master lookup table, then it must be within date range (based on dates of service).
D117E	S	Batch Accept	The Diagnosis Code Additional 16 must be null for member share.
D118C	S	Batch Accept	If Diagnosis Code Additional 17 is provided, it must exist on the Master Lookup table.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 15 of 17

## Wisconsin Healthcare Account Quality Management System

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

Edit Number	Error Category	Program Edit Level	Edit Description
D118D	S	Batch Accept	When the Diagnosis Code Additional 17 is provided and the code is in the master lookup table, then it must be within date range (based on dates of service).
D118E	S	Batch Accept	The Diagnosis Code Additional 17 must be null for member share.
D119C	S	Batch Accept	If Diagnosis Code Additional 18 is provided, it must exist on the Master Lookup table.
D119D	S	Batch Accept	When the Diagnosis Code Additional 18 is provided and the code is in the master lookup table, then it must be within date range (based on dates of service).
D119E	S	Batch Accept	The Diagnosis Code Additional 18 must be null for member share.
H000C	H	Batch Reject	Current encounter file month (Begin Posting Date of current month) must sequentially follow the month of last accepted submission (End Posting Date of the previous month).
H002D	H	Batch Reject	Submission Date must be less than or equal to today's date.
H002E	H	Batch Reject	Submission Date must be greater than or equal to End Posting Date.
H003D	H	Batch Reject	Begin Posting Date must be less than End Posting Date.
H003E	H	Batch Reject	Begin Posting Date must be the first day of the month.
H004D	H	Batch Reject	End Posting Date must be greater than Begin Posting Date.
H004E	H	Batch Reject	End Posting Date must be the last day of the month.
H004F	H	Batch Reject	Begin Posting Date and End Posting Date must have the same month and year.
H005C	H	Batch Reject	Number of Records Transmitted must be equal to the number of detail records in a submission.

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 16 of 17

**Wisconsin Healthcare Account Quality Management System**

Level 3 – WPP Content Edits

MEDS – LTCare Encounter Reporting 2.8.1

**Change Log**

Date	Changes	Changed By	Remarks/Reason
06/30/2007	Document is baselined at version 4. From now on, all changes will be implemented into the baseline document, and documented into the change log.	Syed Aziz	One time document baselining
07/19/2007	Changed edit description for D061E. Added "When supplied"	Ramona Johnson	Bug 2271
07/25/2007	Changed existing XML tag names to new XML tag names.	Ramona Johnson	Content Edits: WPP
09/12/2007	Document format revisions.	Ramona Johnson	Content Edits: WPP
12/12/2007	Added WPP COB content edits: D103B & C, D104B, C & D, D105B & C, D106B, C & D, D107B & C, D108B, C & D, D109B, C.	Ramona Johnson	WPP Content edits: COB Implementation 01/2008. Refer to Bug 2242.
12/12/2007	Edit D006E description and error message changed to: When Record Type = O or C with an adjustment type of N, Original ID must be provided. MISSING DATA: Original_id was not provided.	Ramona Johnson	FC, WPP & SSI Content Edit: Original ID required field beginning 2008 posting dates will be implemented 01/2008. Refer to Bug 2317.
02/22/2008	D109B - Edit has been obsoleted. D109C - Edit severity has been changed from a Batch Accept to a Warning.	Ramona Johnson	Bug 2242 – received email from Robert Haessly as a request: Changes to Encounter Edits D109B and D109C
04/30/2008	Remaining POA Edits added (Diagnosis codes 10-18)	Upendra Raichur	Bugzilla # 2320

Revision Date: 04/30/2008

Author:

Ramona Johnson

Approver:

Location of Document: J:\Account Policies and Procedures\QMS\Level 3 documents -

Team\MEDS\DDES\Encounter\Documentation\Encounter Online Documentation\documentation\POA\contenteditforwpppoa.doc

Page 17 of 17